

A Submission Cover Page must be included with every set of forms submitted to the Corporate Registry.

**FOR PROPER PROCESSING, PLEASE ENSURE ALL PAGES OF THIS FORM ARE SUBMITTED.  
FORMS WITH MISSING PAGES WILL BE RETURNED.**

## Fees

**Submission Fee:** (go to [www.isc.ca/fees](http://www.isc.ca/fees) for the current fee information)

\$ \_\_\_\_\_

**Priority Service:**

Check box for \$500.00 optional additional fee

\$ \_\_\_\_\_

Priority submissions will receive immediate attention and will be reviewed within one business day after being received, where possible. If you are submitting multiple forms for a single entity, only one priority service fee is required. Check **Priority Service** box on each submission cover page.

**TOTAL FEES:**

\$ \_\_\_\_\_

Submissions will be returned if sufficient funds are not available at the time of processing.

## Payment Methods

**ISC offers the following methods of payment:**

- Cheque or money order payable to *Information Services Corporation*
- On ISC account – ISC Account Number: \_\_\_\_\_

To pay by credit card, call the Customer Support Team at 1-866-275-4721 to provide payment information and you must include the ISC Account Number provided on the line above.

**DO NOT** include your credit card information anywhere on these forms.

## Paper Forms Submission Methods

The received date for the submission is the date the forms are received at ISC.

**Mail:** Corporate Registry  
1301 – 1st Avenue,  
Regina, SK S4R 8H2

**Fax:** (306) 787-8999

## Customer Reference Number (optional)

- Your Reference Number: \_\_\_\_\_

Did you know...most submissions are automatically registered when filed online at [corporateregistry.isc.ca](http://corporateregistry.isc.ca)  
This includes Annual Returns, Annual Returns and Financial Statements, Business Name Renewals and most associated notice update submissions.

Visit our website or contact our Customer Support Team for more information:

[www.isc.ca](http://www.isc.ca)

1-866-275-4721

[corporateregistry@isc.ca](mailto:corporateregistry@isc.ca)

**1 NAME RESERVATION DETAILS**

Are you incorporating a new generation co-operative: Select only one (1)  Yes  No

▶ Type of co-operative to be incorporated: (If 'No' to question above) - Select only one (1)

- Consumers' Co-operative     Housing Co-operative     Community Clinic     Community Service Co-operative  
 Employment Co-operative     Other: \_\_\_\_\_

**2 AMALGAMATING ENTITIES**

▶ If a co-operative is being formed under *The Co-operatives Act, 1996*:

- All of the amalgamating entities **must** be active Saskatchewan co-operatives, new generation co-operatives, non-profit corporations or business corporations.
  - A business corporation may only amalgamate into a co-operative if the business corporation is a subsidiary of the co-operative with which it is amalgamating.

▶ If a new generation co-operative is being formed under *The New Generation Co-operatives Act*:

- All of the amalgamating entities **must** be active Saskatchewan co-operatives, new generation co-operatives, non-profit corporations or business corporations.

 **Instructions:**

- If there are more than three (3) amalgamating entities, please photocopy this page before proceeding or enclose an additional page.


Please list all amalgamating entities below.

Entity Number	Entity Name

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Continue on Next Page

▼ Section Below Intentionally Left Blank - For Office Use Only ▼

### 3 AMALGAMATED ENTITY DETAILS

<b>Name Language:</b> ▶ <i>Select <u>only one</u> (1)</i>	<input type="checkbox"/> a. English name only <input type="checkbox"/> b. French name only <input type="checkbox"/> c. English and French names (names must be direct translations) <input type="checkbox"/> d. English name and Indigenous name (names must be direct translations)
<b>Entity Name - ENGLISH:</b> <i>(Complete if option a, c or d is selected above)</i>	<b>▶ Legal Ending:</b> <i>Select <u>only one</u> (1)</i> <input type="checkbox"/> Limited <input type="checkbox"/> Ltd.
<b>Entity Name - FRENCH:</b> <i>(Complete if option b or c is selected above)</i>	<b>▶ Legal Ending:</b> <i>Select <u>only one</u> (1)</i> <input type="checkbox"/> Limitée <input type="checkbox"/> Ltée
<b>Entity Name - INDIGENOUS Language:</b> <i>(Complete if option d is selected above)</i>	
<b>English Translation of Entity Name:</b> <i>(Complete if option b is selected above)</i>	
<b>Nature of Business:</b> <i>(Be specific)</i>  <i>The nature of business is coded in accordance with the North American Industry Classification System (NAICS), the list can be found at <a href="http://www.isc.ca/NAICS">www.isc.ca/NAICS</a>. Multiple NAICS codes can be provided. If a NAICS code(s) is not provided, we will select codes that best match the nature of business description provided.</i>	

### 4 ADDITIONAL INFORMATION (Optional)

<b>▶ Select <u>only one</u> (1) of the following:</b> <input type="checkbox"/> Not applicable <i>(No additional information to provide)</i> <input type="checkbox"/> Able to obtain consent of third party listed in the Notes section below <input type="checkbox"/> Request related to an existing trademark listed in the Notes section below <input type="checkbox"/> Undertake to cancel business name listed in the Notes section below <input type="checkbox"/> Not proceeding with existing name reservation listed the Notes section below <input type="checkbox"/> Other <i>(See the Notes section below)</i>
<b>Notes:</b>   

**5 SUBMITTER INFORMATION, AUTHORIZATION, AND NOTIFICATION PREFERENCE**

**Submitter Information (Submitter must be an individual)**

*\*Indicates mandatory fields*

\*First Name:

\*Last Name:

\*Mailing Address:

Phone Number:

Fax Number:

Email Address:

I certify that I am authorized to file these documents with the Registrar of Co-operatives and that the information in this submission is true.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Preferred Notification Method for the Submission Correspondence/Certificate**

The Registry will communicate with the Submitter regarding this submission using the method selected below and the Submitter's information provided on this form. However, if an ISC Account Number is provided on the submission cover page, communication will be sent to the address information associated with that ISC Account Number.

► **Select *only one* (1):**

*Note: If the preferred notification method is not indicated or incomplete, the default method will be mail.*

- Email     Mail     Fax  
 Corporate Registry online customer portal (ISC Account Number must be provided on the submission cover page)